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Account#: 120000000088 If there are any issues please contact Patrice at 850-202-9071

Date:0	4/23/2024		
Name:	Patrice Rush	<u> </u>	
Reference #:_		_	70241 SEC
Entity Name:_	CYCLE C	OLLECTIVE, LLC	2024 APR 23 SECRETALLARY
	of Incorporation/Authorizatio		3 MHO: 35 RY OF STATE
Change	e of Agent		
☐ Reinsta	tement		
☐ Conver	sion		
☐ Merger			
☐ Dissolu	tion/Withdrawal		
☐ Fictitiou	us Name		
Other_		<u></u>	
Authorized Am Signature:	nount: \$25.00		

F: 800.944.6607

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida

	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) No Change une 25, 2021 Date of filing/registration in Florida CORPORATION SERVICE COMPANY egistered Agent and Registered Office shown on the records of the state of the second	4. ne Florida D	No Chai	(Note: MAY) nge 121000080 Document n	number	
	une 25, 2021 Date of filing/registration in Florida CORPORATION SERVICE COMPANY egistered Agent and Registered Office shown on the records of the state of the	4. ne Florida D	ī.	//210000080 Document n	number	
. (a) <u>C</u>	Date of filing/registration in Florida CORPORATION SERVICE COMPANY egistered Agent and Registered Office shown on the records of the state of the st	ne Florida D		Document n	number	
. (a) <u>C</u>	CORPORATION SERVICE COMPANY egistered Agent and Registered Office shown on the records of the state of the st	ne Florida D	ept. of Stat	_	:c ~2	
. (a) Re	egistered Agent and Registered Office shown on the records of the 1201 HAYS STREET		ept. of Stat	_ :e:	2021 S E S	
1 -	1201 HAYS STREET		ept. of Stat	e:	2021 SE	
_		DDRESS)				
R	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)			- 본복 =	
				-	~	14.1474 44.4774 5 f
_ _ _	Tallhassee, FL_	32301		-		1
(b) C	COGENCY GLOBAL INC.			_	10: 35	المينية ⁴
En	nter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office addr	ess:			
1	115 North Calhoun St., Suite 4					
<u>N</u>	NEW Registered Office Address:			_		
_ T	Tallahassee, FL_	32301		_		
he chang gent will vas/were	nited liability company is not organized under the law ge or changes are made, the Florida street address of all be identical. Or, in the case of a Florida limited lia a authorized by an affirmative vote of the members of es of organization or the operating agreement of the	the registe bility con f the limit	ered offic ipany, it i ed liabilit	e and the bus is hereby con ty company o	siness office of the firmed that the ch	: registere ange(s)
/s/ Mike	e Pickles	Mike I	Pickles	Authoriz	ed Person	
Signature	e of a member or authorized representative of a member			Printed or typ	ed name of signee	
rovisión. he obliga o merelv	accept the appointment as registered agent and agre as of all statutes relative to the proper and complete p ations of my position as registered agent as provided reflect a change in the registered office address, I h in writing of this change.	ee to act in performan I for in Ch pereby con	n this cap ace of my apter 60, afirm that	pacity. I furth duties, and I 5, F.S. Or, if the limited li	her agree to compl am familiar with this document is i iability company h	ly with the and accep being filed as been
	othy Mayville					

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00

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